

NOTICE OF IRREGULAR SALARY OR NO DEPOSIT

NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM SFN 53707 (03-2003)

In compliance with the Federal Privacy Act of 1974, the disclosure of the individual's social security number on this form is mandatory pursuant to 26 U.S.C. Sec. 3402. The individual's social security number will be used for tax reporting and as an identification number.

NDPERS • PO Box 1657 • Bismarck, • North Dakota 58502-1657 (701) 328- 3900 • 1-800-803-7377 • Fax 701-328-3920

PART A	MEMBER INFORMATION	
Name (Last, Fir	st, Mi)	Social Security Number
Department Na	me	Department Number
PART B	NOTICE OF IRREGULAR SALARY OR MISSED DEPOSIT	
☐ Leave of Absence/Leave without Pay (Notice of Status or Employment Change SFN 53611 is attached)		
☐ Hourly Employee – Hours Vary from Month to Month		
Reporting Error – Salaries should be credited as follows:		
	(Month) <u>\$</u> (Amount)	
	(Month) <u>\$</u> (Amount)	
Retirement Contributions Missed on All or a Portion of a Previous Salary – Salaries should be credited as follows:		
	(Month) <u>\$</u> (Amount)	
	(Month) \$ (Amount)	
☐ Seasonal Employee		
☐ Employee and Employer have a formal salary arrangement/contract in place.		
Excess Salary to be annualized over current contract year:		
	Excess Salary \$ to be distributed	i
	from(Month/Year) to	
☐ Employee and Employer have no formal salary arrangement/contract in place.		
Excess Salary \$ to be distributed over physical work period		
	from(Month/Year) to	• •
☐ Membership Termination (Notice of Status or Employment Change SFN 53611 is attached)		
Other:		
_ Other.		
PART C AUTHORIZATION OF AUTHORIZED AGENT		
I certify that the above information is true and correct.		
	Authorized Agent Signature	Date of Signature

INSTRUCTIONS

PART A MEMBER INFORMATION

Enter member's name and social security number Enter the employer's name and department number

PART B NOTICE OF IRREGULAR SALARY OR NO DEPOSIT

Complete this section to document:

- 1. An irregular salary
- 2. A missed retirement contribution
- 3. A seasonal employee's salary agreement

Complete this section to:

- 1. To direct an adjustment to a previously posted salary(ies)
- 2. To initiate a bill to your agency for a missed contribution

PART C AUTHORIZATION OF AUTHORIZED AGENT

Your agency's designated PERS authorized agent must sign and date this form.